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## CUSTOMER NUMBER

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							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/659,299 09/11/2003		<u> </u>	Susumu Hashimoto		242589US2TTCRD		3566
TITLE OF INVENTION	: MAGNETORESISTA	NCE EFFECT ELEMEN	T, MAGNETIC HEAD, A	AND MAGNETIC F	REPROD	UCING APPARATUS	S
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	05/09/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
WATKO, JU	JLIE ANNE	2627	360-324100	•			
1. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Kabushiki Kaisha Toshiba  Tokyo, JAPAN							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗵 Corporation or other private group entity 🛄 Government							
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			<ul> <li>b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Transmitted via EFS-Web.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).</li> </ul>				
5. Change in Entity Stat	•	,					
	s SMALL ENTITY state		b. Applicant is no lo	iger claiming SMAI	LL ENTI	TY status. See 37 CFF	t 1.27(g)(2).
interest as shown by the r	ecords of the United Sta	uired) will not be accepted tes Patent and Trademark	Office.	uic applicant, a regi	sered at	torney or agent; or the	assignee or other party in
Authorized Signature	proph Sca	fetta j	<del></del>	Date		APR 1 0 2	007
	Joseph Scafe	tta, Jr.		Registration N	lo	Reg. No. 26	5,803
This pollogion of inform	stion is required by 27 C	CD 1 311 TL 'C					

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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